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in the present time as in the past, the children of the best white families spend a large part of their childhood in the care and in contact with a colored nurse. It is very important to the welfare of both races that the young colored women who have the care of those children should be well trained and disciplined. It is important that they should understand thoroughly all the physical needs of the children under their care, so that they can keep them in good health. It is equally necessary that these young women's minds should be trained; that they should possess a great store of the wholesome and beautiful lore of childhood, that they should know how to share in their games, their play, and, in all their associations with the children, to impart this lore and learning of childhood in such a way as to inspire high, pure thoughts and ideas, rather than the reverse.

On the other hand, perhaps the greatest need of the Negroes, as of most other people, is that something should be done in the schools the young colored women who have the care of those children should build better and more comfortable houses. They must learn to arrange the whole life that goes on within these homes in an orderly manner. The cooking must be wholesome. The meals must be served regularly, and with a certain amount of ceremony. There must be good books, sound habits, and wholesome ideas. A man can build the house but the woman must, for the most part, furnish the sort of culture and refinement that makes it a home. The course in child nurture and nursing has been established to complete the training in home building which is carried on as part of the industrial training of young women at Tuskegee.

POLIOMYELITIS

By ELIZABETH R. MILLER

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THERE are few diseases that have as pathetic sequelæ as poliomyelitis, a disease about the essentials of which physicians are still in the dark.

It is only within recent years that the disease is known to be a transmissible one, and only very recently that so much is being done to combat the paralysis following, for it is undoubtedly the early diagnosis with intelligent and early treatment that is giving such gratifying results.

Physicians in general, and pathologists in particular, alarmed at the appalling amount of cases recently recorded, particularly in Pennsylvania, are bending every effort to find the cause and prevent the spread

of this truly horrible disease. A recent article in the *Journal of the American Medical Association*¹ gives us some valuable information. The general rules for disinfection should apply to this disease, at least until more is known of its cause, for where so much suffering and disability are involved, surely one cannot be too careful.

As it is difficult to find nurses who have had experience in nursing patients ill with the disease, a recent experience might be of value. Even physicians of years of practice are having their first case, or are watching the progress of another's.

My first case in the acute stage was a patient I attended about four years ago, when it was first called a germ disease. This was a child of twenty-two months, the attack a very severe one presenting marked cerebral symptoms and a left hemiplegia. The child died, although antitoxin had been administered.

It was while nursing a case of typhoid fever in one of our mountain summer resorts, that the attending physician informed me that he had a case of poliomyelitis. He was particularly distressed as it was a very severe case, and was the child of very intimate friends of his. Too much credit cannot be given the physician in attendance for his quick diagnosis (it was his first case) and his intelligent treatment, and to the mother for her exceptionally good care of her boy.

It was after the acute stage had passed and the time had arrived when systematic treatment be given the muscles that I was transferred to the case, my duty being to give massage and electricity. One of the worst phases of the disease is the soreness of the muscles, the slightest touch causing the most excruciating pain, so it is easily seen why the child dreads any motion or manipulation, thus seriously handicapping the nurse.

Children live only in the present, the future does not concern them, so one must first win their confidence, the first few treatments must be of the simplest kind, causing as little pain as is possible, gradually, as the confidence is gained, advancing to the more severe treatment. The child in question, a boy of twelve, had an exceptionally severe attack, with an unusual amount of soreness,—the hand could not be turned or the fingers lifted without making him cry. One must remember that one is not handling a simple case of paralysis, where the patient can be rolled to any position and held in place by cushions. It was impossible to turn the boy to the side as it meant pressure on some sore spot, the arm or leg a fraction of an inch awry, will give the acutest pain.

¹"A Symposium of Anterior Polio-Myelitis," *Journal of the American Medical Association*, October 22, 1910.

A nurse in such a case has occasion to use every art of which she is capable. In turning the boy, an ordinary bed pillow was used, adjusted close to the side, the upper edge coming to the shoulders, the opposite side was grasped firmly at shoulder and hip, and a quick turn made so that he was flat on the pillow. Arms and legs were straightened, head turned to one side, a roll placed under the feet to relieve the pressure on the toes.

The back can then easily be rubbed and pressure on those parts relieved. In making the turn to the back, the pillow is again grasped by the edges, the patient gently pulled to the edge of the bed, then reversed, presto, he is again on his back. As soon as possible a cot was put up downstairs. He was laid on a bolster, with his father to carry him and some one to hold up the feet, the transfer was accomplished with little discomfort.

The morning treatment was given in mid-morning, a nap or at least a rest taken, dinner at 12.30 or 1 P.M., then a transfer was made to a much be-pillowed arm-chair, on which he was pulled to the porch, where he spent the rest of the day.

A very light supper was the rule. I read to him till treatment time, and then he was again carried upstairs, where the windows were always open.

The nurse displays not only tact, but her real ability in the manner in which she approaches the child, and thus gains or loses the confidence of the patient and family. If one has had the dentist hit a jumping nerve in an aching tooth, one can the more readily grasp the child's point of view and be duly considerate. There are two extremes to be avoided, false sympathy and harshness, one is as injurious as the other. A child cries easily and one must learn to discriminate between real and bogus pain, for they are quick to know the weak places and "work" either the nurse or parents.

This boy cried very easily, so in beginning treatment I told him not to cry, but when the sore places were reached to say "stop," quickly, and I would then pass on to the less sensitive places. It was thus I began carefully, slowly, gaining a little every day, until a more general and deeper massage was given. The same rule applies to the electricity, as it is really those first few treatments that are the arbiters of a nurse's success.

Then at first the mother sat by the bed and talked and encouraged, later, when moved downstairs, we had evening concerts while treatment was going on, all joining in, thus diverting his mind and making the hurt less in evidence.

The parents can be of much help to the nurse for if they not only

grasp the fact themselves, but help the child to grasp it, that a certain amount of hurting is necessary, but that it will be made as light as possible, they can be of inestimable value.

The massage at first should be very light, consisting mostly of stroking, gradually the deeper muscles can be manipulated, but too much cannot be said against heavy shoulder movements and twisting the muscles, as they do no good and are exceedingly painful. The patient must be encouraged to help as much as possible in the use of extensors and flexors, no amount of manipulation can take the place of motion from headquarters. Extreme and harsh methods cannot be too strongly condemned. Children are usually very amenable to reason, and the nurse who gives treatment so severe as to occasion two people to hold the child in place, is little short of brutal. One cannot handle such a patient, or give even the lightest treatment without some pain, but gradually this is reduced to a minimum, and finally entirely disappears.

I found that by making much of each little improvement, calling the mother in to see how much better the arm could be moved, or the back arched, or an erstwhile sore spot touched without pain, again in the evening telling the father of the wonderful improvement, the twist of the arm was a wonderful feat; all these were immense helps and made the child willing to do more. Then he was not allowed to be a baby, he was a man in the making, must be considerate of his mother and the nurse, was not allowed to speak disrespectfully; in other words, his infirmities were no excuse for ungentlemanly conduct. After five weeks of treatment the boy was able to stand alone, and after I had left the case I heard that he could walk, by pushing a chair in front of him, which, considering the extent of the paralysis and the extreme soreness of the muscles, is little short of wonderful.

Guard against unnecessary fatigue or hurting. Make all movements quickly and deftly. Consult the patient as to what angle is least painful. Be patient, but firm. Do not hesitate to reward or praise, likewise to entertain. These, and more, will a skillful and gentle nurse do, and success is sure, for we no longer consider the paralysis permanent.

Mild and simple calisthenics should be started as soon as possible, improvement must follow improvement, and gradually the disused muscles brought into play.

It seems like discouraging work, it requires infinite tact, unbounded patience, skill, and gentleness, with a knowledge of how to make the weary hours go by quickly; a game of checkers, of parchesi, the reading of entertaining and instructive books—avoid sensational literature as one would the plague—but what conscientious nurse, having a real love of service, would not be willing to stand the test, to help these poor afflicted children, literally, to help “to make the lame to walk.”